



FORM
D-1

STATEMENT OF ORGANIZATION

PLEASE TYPE OR PRINT IN BLACK INK

FOR OFFICE USE ONLY

RECEIVED

APR 01 2022

State Board of Elections
Springfield Office

Full name and complete mailing address of Political Committee:

Yes for a Larger and Safer School
in Golf District 67
PO Box 638
Morton Grove, IL 60053

☐ CHECK FOR ADDRESS CHANGE

POLITICAL COMMITTEE
IDENTIFICATION #

37346-8

☒ CHECK HERE TO RECEIVE REPORT NOTIFICATIONS VIA E-MAIL ONLY

E-MAIL ADDRESS: dyanalescohier@gmail.com

SEE PAMPHLET "A GUIDE TO CAMPAIGN DISCLOSURE" FOR GUIDANCE

1	<input checked="" type="checkbox"/> NEW COMMITTEE (MUST BE FILED WITHIN 10 DAYS OF CREATION, OR WITHIN 2 DAYS IF CREATED WITHIN 30 DAYS BEFORE AN ELECTION) <input type="checkbox"/> AMENDMENT (MUST BE FILED WITHIN 10 DAYS OF <u>ANY</u> CHANGES. <u>ENTER ONLY THOSE CHANGES FROM LAST D-1 ON FILE.</u>) <input type="checkbox"/> REACTIVATING				
2	DATE COMMITTEE CREATED: 4/4/2022	3	AMOUNT OF FUNDS AVAILABLE AS OF CREATION DATE: \$0		
4	POLITICAL COMMITTEE DESIGNATION (ALL COMMITTEES CHOOSE ONLY ONE) <input type="checkbox"/> CANDIDATE POLITICAL COMMITTEE* *For purposes of contribution limits and reporting requirements, a Candidate Political Committee supporting a candidate for multiple offices elected at different elections must designate an election cycle by listing the office currently sought. This office is: _____ <input type="checkbox"/> POLITICAL ACTION COMMITTEE <input type="checkbox"/> POLITICAL PARTY COMMITTEE <input checked="" type="checkbox"/> BALLOT INITIATIVE COMMITTEE <input type="checkbox"/> INDEPENDENT EXPENDITURE COMMITTEE				
5	POLITICAL COMMITTEE'S AREA OF ACTIVITY, SCOPE, AND PARTY AFFILIATION A. THIS COMMITTEE WILL PRIMARILY OPERATE IN THE FOLLOWING COUNTIES OR DISTRICTS: (if operating statewide or supporting/opposing statewide candidates or ballot initiatives, leave blank.) _____ B. POLITICAL PARTY AFFILIATION: _____ C. NAME AND ADDRESS OF EACH SPONSORING ENTITY (if applicable): _____				
6	PURPOSE OF THE POLITICAL COMMITTEE Support the Golf District 67 Referendum for a Larger and Safer School				
7	CANDIDATE(S) THE COMMITTEE IS SUPPORTING OR OPPOSING (IF AMENDING, LIST ALL AS OF TODAY'S DATE.)				
NAME AND ADDRESS		SUPPORT	OPPOSE	OFFICE	PARTY
		<input type="checkbox"/>	<input type="checkbox"/>		

IF MORE SPACE IS NEEDED, PLEASE ATTACH ADDITIONAL SHEETS.

COMMITTEE NAME:		POLITICAL COMMITTEE ID #: 37346
8 REQUIRED COMMITTEE OFFICERS:		
POSITION	NAME	ADDRESS, PHONE NUMBER, AND E-MAIL ADDRESS
CHAIR	Dyana Lescohier	6405 Hoffman Terrace, Morton Grove, IL 60053 dyanalescohier@gmail.com
TREASURER	Shanna Yetman	7032 W. Wright Terrace, Niles IL 60714 443-845-8751 syshannayetman@gmail.com
9 POSITION, NAME AND ADDRESS OF EACH CUSTODIAN OF THE COMMITTEE'S ACCOUNTS (IF DIFFERENT THAN OFFICERS)		
POSITION	NAME	ADDRESS, PHONE NUMBER, AND E-MAIL ADDRESS
10 FINANCIAL INSTITUTIONS AND OTHER REPOSITORIES OF COMMITTEE FUNDS		
NAME		ADDRESS AND PHONE NUMBER
Glenview Bank & Trust		99 Waukegan Rd, Glenview, IL 60025 847-510-2112
11 DISPOSITION OF RESIDUAL FUNDS IN THE EVENT OF DISSOLUTION OR TERMINATION OF THE COMMITTEE		
11	<input type="checkbox"/> RETURN TO CONTRIBUTORS IN AMOUNTS NOT TO EXCEED THEIR INDIVIDUAL CONTRIBUTIONS	
	<input type="checkbox"/> TRANSFER TO ANOTHER POLITICAL COMMITTEE: _____	
	<input checked="" type="checkbox"/> TRANSFER TO A CHARITABLE ORGANIZATION: <u>Niles Township Food Pantry</u>	
IF MORE SPACE IS NEEDED, PLEASE ATTACH ADDITIONAL SHEETS		
<p style="text-align: center;">VERIFICATION: BALLOT INITIATIVE COMMITTEE ONLY</p> <p>I DECLARE THAT THIS <u>BALLOT INITIATIVE COMMITTEE</u> IS FORMED FOR THE PURPOSE OF SUPPORTING OR OPPOSING A QUESTION OF PUBLIC POLICY. ALL CONTRIBUTIONS AND EXPENDITURES OF THE COMMITTEE WILL BE USED FOR THE PURPOSE DESCRIBED IN THIS STATEMENT OF ORGANIZATION. THE COMMITTEE MAY ACCEPT UNLIMITED CONTRIBUTIONS FROM ANY SOURCE, PROVIDED THAT THIS BALLOT INITIATIVE COMMITTEE DOES NOT MAKE CONTRIBUTIONS OR EXPENDITURES IN SUPPORT OF OR OPPOSITION TO A CANDIDATE OR CANDIDATES FOR NOMINATION FOR ELECTION, OR RETENTION, AND FAILURE TO ABIDE BY THESE REQUIREMENTS SHALL DEEM THIS COMMITTEE IN VIOLATION OF THIS ARTICLE (10 ILCS 5/10).</p>		
<u>Dyana Lescohier</u> <u>Dyana Lescohier</u>		<u>4/1/2022</u> DATE
PRINTED AND WRITTEN SIGNATURE OF COMMITTEE CHAIR		
<p style="text-align: center;">VERIFICATION: INDEPENDENT EXPENDITURE COMMITTEE ONLY</p> <p>I DECLARE THAT THIS <u>INDEPENDENT EXPENDITURE COMMITTEE</u> IS FORMED FOR THE EXCLUSIVE PURPOSE OF MAKING INDEPENDENT EXPENDITURES. (i) ALL CONTRIBUTIONS AND EXPENDITURES OF THE COMMITTEE WILL BE USED FOR THE PURPOSE DESCRIBED IN THIS STATEMENT OF ORGANIZATION, (ii) THE COMMITTEE MAY ACCEPT UNLIMITED CONTRIBUTIONS FROM ANY SOURCE, PROVIDED THAT THE INDEPENDENT EXPENDITURE COMMITTEE DOES NOT MAKE CONTRIBUTIONS TO ANY CANDIDATE POLITICAL COMMITTEE, POLITICAL PARTY COMMITTEE, OR POLITICAL ACTION COMMITTEE, AND FAILURE TO ABIDE BY THESE REQUIREMENTS SHALL DEEM THIS COMMITTEE IN VIOLATION OF THIS ARTICLE (10 ILCS 5/10).</p>		
PRINTED AND WRITTEN SIGNATURE OF COMMITTEE CHAIR		DATE
<p style="text-align: center;">VERIFICATION: ALL POLITICAL COMMITTEES</p> <p>I DECLARE THAT THIS STATEMENT OF ORGANIZATION (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS), HAS BEEN EXAMINED BY ME AND, TO THE BEST OF MY KNOWLEDGE AND BELIEF, IS A TRUE, CORRECT, AND COMPLETE STATEMENT OF ORGANIZATION AS REQUIRED BY ARTICLE 9 OF THE ELECTION CODE. I UNDERSTAND THAT WILLFULLY FILING A FALSE OR INCOMPLETE STATEMENT OF ORGANIZATION IS SUBJECT TO A CIVIL PENALTY OF AT LEAST \$1,001 AND UP TO \$5,000.</p>		
PRINTED AND WRITTEN SIGNATURE OF TREASURER OR CANDIDATE		DATE
<p>THE ILLINOIS STATE BOARD OF ELECTIONS REQUIRES THE DISCLOSURE OF INFORMATION THAT IS NECESSARY IF YOU QUALIFY AS A POLITICAL COMMITTEE AS OUTLINED UNDER PUBLIC ACT 78-1183. WILLFUL FAILURE TO FILE OR A WILLFUL FILING OF A FALSE OR INCOMPLETE INFORMATION REQUIRED BY THIS ARTICLE SHALL CONSTITUTE A BUSINESS OFFENSE SUBJECT TO A FINE OF UP TO \$5,000. THIS FORM IS IN COMPLIANCE WITH THE FORMS MANAGEMENT PROGRAM ACT.</p>		

STATE BOARD OF ELECTIONS
2523 S. LA SALLE BLVD.
SPRINGFIELD, IL 62704-4504

FAX: 312-724-5453
E-MAIL: D1@ELECTIONS.IL.GOV (D-1s ONLY)

www.elections.il.gov

ALL POLITICAL COMMITTEES RETURN TO

STATE BOARD OF ELECTIONS
69 W. WASHINGTON ST., STELLUS
CHICAGO, IL 60602-3020

FAX: 312-314-6465
E-MAIL: D1@ELECTIONS.IL.GOV (D-1s ONLY)